**Managing Risk**

1. **Statement of Intent** 
   1. Omega Care Group is fully committed to the creation of a safe and healthy working and living environment for all stakeholders.
   2. This policy applies to all services supporting children and vulnerable adults operated by Omega Care Group.
   3. Omega Care Group is committed to upholding Children Regulation 2015 and working towards the 9 quality standards. As per the Protection of Children Standard, this policy sets out operational guidance in supporting children and young people to meet their full potential.
   4. To outline roles and responsibilities and training of the workforce to competency and effectiveness of response to hazards and risk that may arise.
   5. Provide insight into operational requirements and procedures to ensure the safety of the homes.
2. **Definitions** 
   1. Throughout this policy the term “child” will refer to children and young people.
   2. Risk Management Plans: A tool used to identify risk associated with a child and a detailed plan to reduce risk Home managers are responsibly in ensuring the completion of this documentation.
   3. Activity Risk Assessment: A tool used to examine individual hazards linked to the activity. Home managers are responsibly in ensuring the completion of this documentation.
   4. Daily Checks: A collections of checks completed daily to ensure the safety of the home e.g. food temperature checks, sharps, medication, fridge and freezer checks. Home managers are responsibly in ensuring the completion of this documentation.
   5. Weekly H&S Checks: A tool completed daily to identify any hazard in the home. Home managers are responsibly in ensuring the completion of this documentation.
   6. Vehicle Safety Checks: A tool completed daily in services which require transporting to check the safety of the vehicles. Home managers are responsibly in ensuring the completion of this documentation.
   7. COSHH Risk Assessment: A tool used in conjunction with data safety sheets to examine Control of Substances Hazardous to Health (COSHH). Home managers are responsibly in ensuring the completion of this documentation.
   8. Lone working Risk Assessment: A legal document completing for any employee who lone works. Home managers are responsibly in ensuring the completion of this documentation.
   9. First Aid Risk Assessment: A legal document to assess the risk posed to every workplace. Home managers are responsibly in ensuring the completion of this documentation.
   10. Stress Work Force Risk Assessment: A legal document used to capture the exposure of stress on the work force and preventative measures to reduce the consequence of stress. Home managers are responsibly in ensuring the completion of this documentation.
   11. Monthly House Risk Assessment: A document completed each month highlighting key hazards and reactive measures to reduce risk. Home managers are responsibly in ensuring the completion of this documentation.
3. **Assessing Risk**
   1. This is a practical process whereby competent and experienced individuals examine what could potentially cause harm to people in the carrying out (delivery) of the work of the company. It is then possible to evaluate whether there are sufficient safeguards currently in place or if it is necessary to add more to prevent harm. The aim of the process is to ensure that no one gets hurt or becomes ill.
   2. Omega Care Group will carry this out by determining whether a hazard is significant and whether it is adequately addressed and controlled so that the remaining risk is small.
   3. **Hazard:** Something with the potential to cause harm.

(Inherent in this action of harm is severity in terms of damage and / or injury and the numbers affected).

* 1. **Risk:** The likelihood of that potential harm from the hazard being realised.

METHODOLOGY

Omega adopts a practical and pragmatic approach to assessing risk which embeds it within organisational culture as an integral element of its working practices. Omega follows the ‘5 steps to Risk Assessment’ process as outlined in the guidance procedures by the Health and Safety Executive.

**Step 1: Identify the Hazards**

1. An initial walk through and overview identifying categories and recording any obvious hazards.
2. An in-depth assessment of potential hazards (including unseen ones e.g. fire and carbon monoxide).
3. Capture the findings on recording sheets.

**Step 2: Identify who may be at risk**

1. Identify who might be harmed and how. These include staff, child and young people in residence and visitors (including social workers, medical staff etc.).
2. Identify if there are any specific circumstances that may place an individual at greater risk e.g. mobility issues; pregnancy.

**Step 3: Evaluate the risks**

1. An assessment of the likelihood of each potential hazard causing harm. This evaluation will determine whether more needs to be put into place to reduce the risk.
2. It will also establish whether the risk remaining after the additional precautions have been instituted is high / medium / or low. The aim of the process is to establish whether existing controls are adequate and proportionate or whether additional precautions should be enacted.

**Step 4: Record Findings**

1. All findings and responses are recorded, dated, signed and kept as a permanent record. These form an ongoing record and overview of the Risk Assessment process and ensure rigour throughout its application.
2. Omega can demonstrate through its practices that it has carried out proper and proportionate checks, taking into account all contributory factors that impact on the level of risk.

**Step 5: Review and Revise**

1. All Risk Management Plan processes will be reviewed on a regular basis in line with maintaining best practice. There will be an immediate review if there are any specific changes introduced that may impact on the level of risk. These could include alterations to premises, new working practices or pregnancy in staff member or children and young person.

**Risk Assessment: Flow Chart**

**Walk Through**

**Review and Revise**

**Assess risk control measures necessary**

**Monitor effectiveness**

**No**

**Yes**

**Existing precaution adequate**

**Evaluate Risk**

**High / Medium / Low**

**Evaluate likelihood**

**High / Medium / Low**

**Evaluate hazards**

**High / Medium / Low**

**Identify who may be affected**

**Identify and list hazard**

**New control measures introduced**

1. **Risk Management Plan Rating**

Omega Care Group’s operational framework is based on assessing the potential harm that a hazard may cause and the likelihood of this harm occurring. The level of hazard and likelihood are each allocated a value within one of 3 categories whereby:

**Severity** are defined as:

1. Extremely harmful (may cause death, major injury and or major damage).
2. Harmful (resulting in an over 3-day injury, damage to environment).
3. Slightly harmful (minor 1st aid injury, minor damage).

**Frequency** is defined as:

1. Highly likely (extremely likely to occur – probable).
2. Likely (frequent, often or likely)
3. Unlikely (slight chance – uncommon).

This generates a grid which plots **Severity** against **Frequency** and provides a **RISK** value.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Severity**  **High** | **Severity**  **Medium** | **Severity**  **Low** |
| **Frequency**  **Highly Likely** | **Intolerable** | **High – H** | **Medium - M** |
| **Frequency**  **Likely** | **High - H** | **Medium - M** | **Low - L** |
| **Frequency**  **Unlikely** | **Medium - M** | **Low – L** | **Trivial - T** |

**Actions**

Intolerable: - Requires an **IMMEDIATE** response to manage risk – all other activities halted.

High: - Priority, urgent action must be taken to reduce the severity and / or likelihood of the risk.

M – Medium: - Must receive priority attention to reduce the level of risk.

Low: - But must receive attention to verify if risk can be reduced and / or managed more effectively.

Trivial: - Lowest priority but will require ongoing monitoring

1. **Responsibility** 
   1. Every employee has a duty to respond and raise any Health and Safety issues of concern
   2. It is the responsibility of the manager to ensure all risk management tools are done to a good standard and must sign them of at least monthly.
   3. It is the responsibility of the manager to ensure their workforce have completed training regarding managing risk
2. The manager is accountable in ensuring every home is clean, safe and adheres to all statutory and non-statutory guidance.
3. **Children and Young People Risk Management Plans**
   1. Omega Care Group undertakes an individual Risk Management Plans of every child when they begin their relationship with the service
   2. The Risk Management Plans are aimed at supporting and enabling the child to manage any behaviours that have, or may, put them or others at risk. The process is developed using information obtained from the relevant social worker, referral documentation, input from other sources (e.g. family members, if appropriate) and through direct interaction with the child and young person themselves.
   3. Triggers, specific events and reasons leading to behaviours which challenge, are identified and addressed through implementation of a range of safeguards. These may include engaging in specific activities, agreed contact times, provision of mobile phone, etc. The individual child and young person is proactively encouraged and supported in addressing behaviours that may put them in positions of vulnerability and / or risk.
   4. The risk attached to any particular subject is rated on a traffic light system of

HIGH, MED, LOW

With this scale we can tailor a risk assessment to the individual and it becomes person specific.

* 1. If the risk of a particular behaviour is assessed as being low (minimal / trivial) they may be no need to implement further action at that time. However, the situation should continue to be monitored, reviewed and amended as an identified need emerges.
  2. If a behaviour generates a high-risk rating, all possible further actions to reduce this must be put in place immediately, recorded, monitored and reviewed. Additional safeguards should be discussed (wherever possible) with the child and young person, and a positive engagement in managing their own levels of risk actively promoted.
  3. All Risk Management Plans are reviewed on a continuous cycle. The individual assessment of risk is a fluid process, responding to change, development and the identification of additional factors that impact on behaviour. All information, in the form of incident reports, key work sessions and additional information from other sources are cross referenced to the corresponding behaviours category. This creates a reference context, whilst enabling the Risk Management Plans to remain concise and accessible with all pertinent information recorded.
  4. Risk ratings for any particular behaviour(s) shown may reduce or increase to reflect the current status of the individual. The specific reasons and rationale for the adjustment should be clearly explained and recorded. This would be followed by a period of close monitoring, information sharing and a short-term review.
  5. It is the home manager’s responsibility in ensuring Risk Management Plans of a good standard and relevant to the child
  6. The Home manager must sign the child’s risk management plan off monthly and ensure their workforce hold good knowledge and understanding to risk.
  7. It is the home’s manager responsibility in ensuring their workforce have training in identifying and addressing risk in line with Omega’s ethos.

1. **Procedure for Completing a Child Risk Management Plan:**
   1. Identify the risk factors impacting on the individual young person *(see example list – add/delete where appropriate).*
   2. Using signs of safety person centred approach and including appropriate input from the child and young person, establish a current risk rating for each factor.
   3. Complete all sections of the Risk Assessment for each individual risk factor.
   4. Record identified triggers and any known early warning signs.
   5. Record any preventative measures which is a intervention embed prior to the hazard occurring
   6. Record any reactive measures which is a measure utilised following the hazard occurring.
   7. Identify the current safeguards in place to reflect and manage the individual risk factor *(have input from young person on their own identified measures)*
   8. Record significant, relevant incidents/events which have taken place prior to placement under ‘Historic Context’.
   9. Capture the child and young person’s insight and judgement of risk and their use of negative and positive protective measures.
   10. Establish a review date for the Risk Management Plan. This should be undertaken /monthly or immediately following a significant incident. This will ensure the effectiveness and currency of the safeguards in place.
   11. Relevant information e.g.: incident forms, safeguard forms and key work records are cross referenced by date to the Cross-Ref. column. This provides accessible, in depth support for the overall Risk Assessment.
   12. Further action is identified with a change in circumstances, knowledge base and/or a review of the effectiveness of the current measures in place.
2. **Potential Identified Risk:**

* Allegations
* Bullying
* Child abuse
* Child exploitation
* Community safety
* Debt
* Digital & E-safety
* Domestic abuse/violence
* Emotional wellbeing
* Equality & diversity
* Fire safety risk
* Gang affiliation
* Home safety
* Medication
* Missing from home
* Offending behaviour
* Physical wellbeing
* Radicalisation
* Self-harm
* Sexual behaviour
* Suicidal ideation
* Suicidal intent
* Substance Misuse
* Violence and/or aggression
* Travelling in a vehicle
  1. Some of these identified risks may be multi-dimensional e.g.: emotional wellbeing could include anxiety, depression, personal hygiene and eating issues. The assessment should be specific in the identification of the relevant risk factor(s) involved. *(there will never be 2 identical risk assessments)*
  2. The list above is indicative rather than prescriptive and the specific risk factors are relevant to the individual young person. Non relevant identified risk should be deleted from the master suggested list.
  3. The child risk management plan is a working document and as such, should include all relevant information (either directly or through the cross referential system). It should however be concise, bullet pointed and objective. It should also reflect any changes in the level of risk for any particular factor as identified within the review process.
  4. Each home should review risk assessments weekly, regardless of risk ratings for each factor.
  5. A risk management plan mustbe updated following any significant event taking place. The home manager is responsible in ensuring the workforce’s approach is evolving in line with the child’s needs.

1. **Activity Risk Assessment**
   1. A tool used to assess generic risk for each activity in which children admitted into the home may participate in.
   2. It is the responsibility of the staff member completing in the activity to ensure the activity risk assessment is up to date
   3. It is the responsibility of the home manager to ensure each month that the activity risk assessment is valid and relevant
2. **Weekly House Risk Assessment** 
   1. It is a document in which gets repeated daily and is tailored to each individual home. It is essential that the following are completed in order to meet the H&S needs of the organisation and legislation pertaining to Health & safety at work act 1974.
   2. Any hazards highlighted using this tool must be recorded in ‘request and repairs’ and actioned in a timely fashion.
   3. Relevant contractors or maintainace will need to be contacted dependant on the concern.
   4. Any findings of concern must be eliminated where possible, where not

possible or risky to do so these must be minimised, brought to the attention of alland suitable contractors contacted.

* 1. The senior/line manager must be informed of all repair needs and H&S risks.
  2. H&S is everybody’s responsibility.
  3. It is the house managers responsibility to ensure the weekly home risk assessment is signed of weekly and all outcomes to actions are achieved.
  4. It is the house manager’s responsibility to ensure every member of the workforce in the home are competent in managing the H&S of the home.

**Risk Management Plan Children and Young People**

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| --- | --- | --- | --- | --- |
| **Name:** |  | | **Date Created:** |  |
| **Identified Risk:** |  | | **Level of risk:** |  |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | Insignificant consequence | Minor – consequence | Notable – consequence | Serious - consequence | | Certain | Low | Medium | High | High | | Probable | Low | Medium | High | High | | Possible | Low | Low | Medium | High | | Unlikely | Low | Low | Low | Medium | | | **Context:** | | |
| **Early Indicators:** | | | **Protective Factors:** | |
| **Primary and Secondary intervention and strategies** |  | | | |
| **Tertiary intervention and strategies** |  | | | |
| **Young person’s view on risk:** |  | | | |
| **Young person’s own interventions and strategies:** |  | | | |
| **Cross reference of other documentation:** |  | | | |
| **Historic information:** |  | | | |
| **Hand Written updates (Any updates in the last 4 weeks)** |  | | | |

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| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Reviewed By:** |  | **Reviewed on** |  | **Next review date:** |  | | | | | | |
| ***Signature confirming understanding and compliance of the risk management plan*** | | | | | |
| **Name** | **Signature** | **Date** | **Name** | **Signature** | **Date** |
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**Daily Health and Safety Check**

| **Operational Check** | | **Met: Y/N** | | | | | | | | **Risk: H/M/L** | **Action:** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **WC:** |  | **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** | **Sat** | **Sun** | |  |  |
| **Fire exits functional.** | |  |  |  |  |  |  |  | |  |  |
| **Escape routes clear/ unobstructed?** | |  |  |  |  |  |  |  | |  |  |
| **Fire doors operational?** | |  |  |  |  |  |  |  | |  |  |
| **Fire blanket in place?** | |  |  |  |  |  |  |  | |  |  |
| **Extinguishers functional?** | |  |  |  |  |  |  |  | |  |  |
| **Fire warning system operational?** | |  |  |  |  |  |  |  | |  |  |
| **Emergency lighting operational?** | |  |  |  |  |  |  |  | |  |  |
| **Emergency exit signs in place?** | |  |  |  |  |  |  |  | |  |  |
| **Emergency whistle in place?** | |  |  |  |  |  |  |  | |  |  |
| **Emergency flashlight in place?** | |  |  |  |  |  |  |  | |  |  |
| **Evacuation procedure on display?** | |  |  |  |  |  |  |  | |  |  |
| **Harmful COSHH substances stored correctly/locked away?** | |  |  |  |  |  |  |  | |  |  |
| **Sockets undamaged?** | |  |  |  |  |  |  |  | |  |  |
| **Light switches working?** | |  |  |  |  |  |  |  | |  |  |
| **Electrical leads undamaged?** | |  |  |  |  |  |  |  | |  |  |
| **Electrical equipment in good order?** | |  |  |  |  |  |  |  | |  |  |
| **Equipment off when not in use?** | |  |  |  |  |  |  |  | |  |  |
| **Tumble drier de-fluffed?** | |  |  |  |  |  |  |  | |  |  |
| **No build-up of waste?** | |  |  |  |  |  |  |  | |  |  |
| **Utility shut off valves visually ok?** | |  |  |  |  |  |  |  |  | |  |
| **Floor condition clean and dry?** | |  |  |  |  |  |  |  |  | |  |
| **Stairs clear? No damage?** | |  |  |  |  |  |  |  |  | |  |
| **Door closers functional?** | |  |  |  |  |  |  |  |  | |  |
| **Access and exits – no trip hazards?** | |  |  |  |  |  |  |  |  | |  |
| **House – no trip hazards?** | |  |  |  |  |  |  |  |  | |  |
| **Pathways free from obstructions?** | |  |  |  |  |  |  |  |  | |  |
| **All surfaces clean?** | |  |  |  |  |  |  |  |  | |  |
| **Toilets and bathrooms cleaned?** | |  |  |  |  |  |  |  |  | |  |
| **Bins/ recycling emptied to outside bins?** | |  |  |  |  |  |  |  |  | |  |
| **Sharps Checklist Completed.** | |  |  |  |  |  |  |  |  | |  |
| **Tool box secure** | |  |  |  |  |  |  |  |  | |  |
| **Amnesty boxes checked** | |  |  |  |  |  |  |  |  | |  |
| **Food hygiene Checks completed, (dates, fridge/freezer temps)** | |  |  |  |  |  |  |  |  | |  |
| **Maintenance issues reported and recorded.** | |  |  |  |  |  |  |  |  | |  |
| **Unit mobile phone operational?** | |  |  |  |  |  |  |  |  | |  |
| **Lone working policy operational?** | |  |  |  |  |  |  |  |  | |  |
| **Stress R.A in place?** | |  |  |  |  |  |  |  |  | |  |
| **Office door secure/lockable?** | |  |  |  |  |  |  |  |  | |  |
| **Furniture in good repair?** | |  |  |  |  |  |  |  |  | |  |
| **Safe water practices followed? Hot and cold running water in all sinks, toilets flush** | |  |  |  |  |  |  |  |  | |  |
| **Visitors book current?** | |  |  |  |  |  |  |  |  | |  |
| **Has medicine cabinet contents been checked and counted? This included temperature check of the medicine safe.** | |  |  |  |  |  |  |  |  | |  |

| **Day** | **Cleanliness Found** | | | | | | | **Risk** | **Action** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lounge** |  |  |  |  |  |  |  |  |  |
| **Hallway** |  |  |  |  |  |  |  |  |  |
| **Kitchen** |  |  |  |  |  |  |  |  |  |
| **Utility** |  |  |  |  |  |  |  |  |  |
| **Downstairs Toilet** |  |  |  |  |  |  |  |  |  |
| **Dining Room** |  |  |  |  |  |  |  |  |  |
| **Upstairs Toilet** |  |  |  |  |  |  |  |  |  |
| **Staff bedroom small** |  |  |  |  |  |  |  |  |  |
| **Staff bedroom large** |  |  |  |  |  |  |  |  |  |
| **Office** |  |  |  |  |  |  |  |  |  |
| **YP room** |  |  |  |  |  |  |  |  |  |
| **Upstairs wash room** |  |  |  |  |  |  |  |  |  |
| **Upstairs hall** |  |  |  |  |  |  |  |  |  |
| **Garden** |  |  |  |  |  |  |  |  |  |
| **Garage** |  |  |  |  |  |  |  |  |  |

| **Day** | **Additional Comments** | **Staff completing check** | **Sign** | **Date** |
| --- | --- | --- | --- | --- |
| **Monday** |  |  |  |  |
| **Tuesday** |  |  |  |  |
| **Wednesday** |  |  |  |  |
| **Thursday** |  |  |  |  |
| **Friday** |  |  |  |  |
| **Saturday** |  |  |  |  |
| **Sunday** |  |  |  |  |

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| **Management Comments** | **Sign** | **Date** |
|  |  |  |